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NONPROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002624

1. Corporation Name

CATTLEMEN CENTER CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
999 CATTLEMEN RD UNIT ~~C~~ F SARASOTA FL 34232 US	999 CATTLEMEN RD UNIT ~~C~~ E SARASOTA FL 34232 US

2. Principal Place of Business 21 999 CATTLEMEN RD) Suite, Apt. #, etc. 22 UNIT F City & State 23 SARASOTA FL Zip / Country 24 34232-2849 25 SARASOTA	2a. Mailing Address 26 999 CATTLEMEN RD) Suite, Apt. #, etc. 27 UNIT F City & State 28 SARASOTA FL Zip / Country 29 34232-2849 30 SARASOTA	3. Date Incorporated or Qualifed 05/20/1994 4. FEI Number 65-0536403 ☐ Applied For ☐ Not Applicable 5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

MCDANIEL, ROBERT S JR
1444 1ST ST.
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. PD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	SUNDERHAUS, GLEN D		1.2 NAME	RICK MARTIN	
STREET ADDRESS	999 G CATTLEMEN RD		1.3 STREET ADDRESS	999 CATTLEMEN RD) UNIT A	
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	SARASOTA FL 34232-2849	
TITLE	VPD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RAGAN, RANDALL R		2.2 NAME		
STREET ADDRESS	999 D CATTLEMEN RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	3.1 TITLE	STD	☒ Change ☐ Addition
NAME	SUNDERHAUS, SARA		3.2 NAME	DENNIS PAQUETTE	
STREET ADDRESS	999 G CATTLEMEN RD		3.3 STREET ADDRESS	999 CATTLEMEN RD UNIT F	
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST-ZIP	SARASOTA FL 34232-2849	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dennis Paquette DENNIS PAQUETTE 3/11/99 941-342-6687
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #